

REMARKS

Claim Status

The application as filed included claims 1-92. In an Office Action dated September 22, 2005, claims 1-92 were rejected. In response, Applicants filed an Amendment and Response on February 22, 2006, in which Applicants amended claim 82 and added claims 93 and 94 to more distinctly point out the subject matter of the invention. Applicants also cancelled claims 74-81, 91 and 92 without prejudice, and reserved the right to pursue these claims in related applications.

Subsequently, a Restriction Requirement was issued on May 18, 2006, in which the Examiner requested that the Applicants elect between Group I consisting of claims 1-73 and Group II consisting of claims 82-90 and 93-94. In a Response dated June 8, 2006, Applicants elected Group I.

A Final Office Action issued on August 30, 2006, rejecting claims 1-73. In this Response, Applicants amend independent claims 1 and 27. Support for these amendments can be found at least at line 29 of page 18 through line 20 of page 19 of the application as filed. No new matter has been added.

Applicants note that due to administrative error, there is no claim 62 in the application.

Claim Rejections

Claims 1-61, 68-73 were rejected under 35 U.S.C. § 103(a) as unpatentably obvious in view of U.S. Patent No. 6,343,271 to Peterson et al. (“Peterson”) in view of U.S. Patent No. 6,922,810 to Trower II et al. (“Trower II”).

Claims 63-67 were rejected under 35 U.S.C. §103(a) as unpatentably obvious in view of Peterson and Trower II, and in further view of U.S. Patent No. 5,491,628 to Wakayama et al. (“Wakayama”).

Rejection of Claims 1-61 and 63-73 under §103(a)

Independent claims 1 and 27 as amended both recite, in part, “calculating a score representing a confidence that the received information corresponding to the claim includes sufficient information to identify a provider and a member,” “determining if the calculated score exceeds an auto-adjudication threshold” and if so, automatically determining of the provision is applicable to the claim. Neither Peterson nor Trower II teaches or suggests the use of such a scoring technique.

Peterson is generally directed to “a claims processing system for electronically reviewing and adjudicating medical insurance claims.” Healthcare providers use the system to “electronically prepare and submit claims for payment.” As part of the process, Peterson describes a “precheck process” which is “used to determine whether the claim may automatically adjudicated or must instead by (sic) manually adjudicated.” Peterson, Col. 4, lines 26-29. Peterson does not, however, make any mention of using a scoring technique and comparing the scores to a threshold.

Trower II is generally directed to a computer user interface which “allows users to input requests to various application or software modules executing on the computer” and provides the user with “a grammar-based automatic completion of the user input so far, and/or a grammar-based suggestion list of one or more possible options for completing the user input.” Not only is Trower II silent with respect to scoring claims and comparing those scores to a threshold, but is completely devoid of any notion of adjudicating healthcare claims.

A combination of the references, whether or not proper, fails to produce essential features of the claimed invention. As stated above, independent claims 1 and 27 as amended both recite, in part, “calculating a score representing a confidence that the received information corresponding to the claim includes sufficient information to identify a provider and a member,” “determining if the calculated score exceeds an auto-adjudication threshold” and if so, automatically determining of the provision is applicable to the claim. Peterson’s claim adjudication system does not include any such scoring technique, nor does it contemplate comparing a score to a threshold. Trower II does not

cure this deficiency. Trower II describes “using a context free grammar to create an expression for input to a database information retrieval system” and nowhere contemplates or describes how such a system could be applied in a healthcare context.

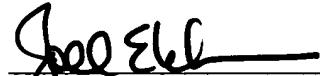
More broadly, as noted in Applicants’ February 22, 2001, response, Peterson simply would not motivate one skilled in the art to use a context-free grammar to adjudicate healthcare claims, nor is there anything in Trower II that would suggest using the computer system described therein to process healthcare claims. First, as the Examiner recognizes, Peterson is silent with respect to any mention of a grammar-based adjudication approach. Trower II does not supply what Peterson lacks in this regard. Nowhere does Trower II teach or suggest using a context-free grammar to process healthcare claims, as recited in the present claims. The present inventors’ recognition that there is a structure to health insurance agreements that can be rigidly and readably expressed in a context free grammar was a major innovation. Applicants’ use of a context free grammar to adjudicate healthcare claims is neither taught nor made obvious by the prior art.

Thus, because neither Peterson nor Trower II teaches or suggests every element of independent claims 1 and 27, Applicants respectfully submit that these references, alone or in combination, fail to render these claims obvious. Accordingly, Applicants respectfully request reconsideration and withdrawal of the rejection of claims 1 and 27 under 35 U.S.C. §103(a), as well as those claims that depend directly or indirectly therefrom.

CONCLUSION

In view of the foregoing, Applicants respectfully requests reconsideration, withdrawal of all grounds of rejection, and allowance of claims 1-61 and 63-73 in due course. The Examiner is invited to contact Applicants' undersigned representative by telephone at the number listed below to discuss any outstanding issues.

Respectfully submitted,



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